

MATRIX™

ADVOCARE NETWORK

Corporate Office
 3300 County Road 10 • Suite 505
 Minneapolis, MN 55429
 763/560-1010 • Fax 560-1717
 www.matrixadvocare.com
 matrix@visi.com

Issues

*Information and ideas for those
 serving seniors.*

on Aging

The Ten Most Common Health Care Mistakes of Seniors

A survey of 500 seniors by the Institute for Healthcare Advancement (IHA), a non-profit organization based in California, found that seniors make ten common mistakes regarding their health. If seniors would make changes in the areas identified by IHA, they could avoid health problems and enjoy a healthier, better quality of life for a longer time.

While some seniors will take the initiative when presented with this information, many others need intervention to change their behaviors. A geriatric care consultant can be instrumental in effecting changes in health care behaviors when families have tried and failed. The role reversal and accompanying stress that occurs when well-intentioned relatives intervene can be avoided when a professional assists with health-related and social issues.

Mistake #1: Driving when it is no longer safe

◆ **The Problem**

Most seniors believe they retain safe driving habits and skills longer than they actually do. Changes in vision, hearing, and reaction time affect driving skills as people age. Many seniors compensate for these changes by avoiding driving during rush hour, staying off freeways, and not driving after dark. However, these limits do not affect such problems as confusing the accelerator and brake pedals or turning left in front of oncoming traffic, common reasons for crashes involving elderly drivers. Older adults with cognitive impairments such as memory loss or disorientation to time or place cause risk to themselves and others when they continue to drive. They may lose their way, ending up many miles from their intended destinations,

they may lose their car in parking lots, and they may be unable to find their way home.

◆ **The Solution**

AARP and AAA offer programs to maximize the skills of older drivers. Some states offer a reduction in car insurance premiums for drivers who complete the course. Seniors should ask for input regarding their driving skills from their families and doctors. Driver testing can be arranged through the sites that test for driver's licenses or through agencies that train disabled people to drive. If drivers refuse to stop driving, a geriatric care consultant can intervene to arrange for proper evaluation and alternatives to driving.

Mistake #2: Fighting the aging process

◆ **The Problem**

In this youth-worshipping society, the signs of aging are anything but desired. Hearing aids, bifocals and trifocals with lines, canes, walkers, and even gray hair are avoided. For people who need these assistive devices, however, not using needed aids will exacerbate problems with hearing, vision, and mobility.

◆ **The Solution**

Seniors and those who care about them should take advantage of all the technology available to maximize hearing, vision, and mobility. New, computer-programmed hearing aids are nearly invisible, and can be made to squelch background noise and amplify hearing in different settings. Glasses and contact lenses are attractive enough to be fashion statements, and those needing bifocal or trifocal lenses can consider the "lineless" varieties. Mobility enhancing devices such as canes, walking sticks, and assorted types of walkers can prevent fall and fractures, which would

limit function and mobility. When seniors are reluctant to obtain or use assistive devices, a geriatric care consultant can be effective in learning why the senior is resisting and providing information and encouragement for a trial of the device.

Mistake #3: Reluctance to talk to doctors about problems

◆ The Problem

Seniors are frequently reluctant to talk with doctors about “embarrassing” problems such as elimination or sexual issues. Sometimes seniors fear that if they tell their doctors about all their health problems, they will be put into a nursing home. Older adults are often very reluctant to mention their symptoms of depression, assuming it is normal to feel down in older age.

◆ The Solution

Seniors need to understand that their physicians need to know about all their problems, symptoms and concerns. If seniors realize that all body systems are connected and that many conditions and medications cause overlapping symptoms, they may be more inclined to share information with their doctors. In fact, failing to “come clean” with all their problems makes them more and not less likely to be hospitalized or institutionalized. If seniors are unable to convey all their concerns and symptoms to their physician, they may need an advocate, either a family member or professional, to assist them in their medical appointments.

Mistake #4: Not understanding what the doctor says

◆ The Problem

All too often, doctors talk in “medicalese” instead of plain English, making it impossible to understand what they are saying. Sometimes older patients are hard of hearing, don’t speak English as their native language, are anxious, or for other reasons simply don’t understand the doctor. It is impossible to implement the physician’s plan of care if the plan is misunderstood. Thus, it is crucial for patients to insist on an explanation, diagnosis, and treatment plan they can understand.

◆ The Solution

Seniors should take someone with them to their appointments if they have had problems understanding their doctor for any reason in the past. A family member, trusted friend, or professional geriatric care consultant can be highly effective in this role. Also, asking the doctor to write down the diagnosis, medications,

side effects, and other such information can help ensure it is understood and remembered.

Mistake #5: Disregarding the serious risk of a fall

◆ The Problem

Most seniors are unaware of the high risk of falling that occurs with age. Actually, one out of three people 65 years and older falls every year. Falls are also the leading cause of injury deaths among people 65 years old and older. Falls account for 87% of fractures for people 65 and older, and are the second leading cause of spinal cord and head injury in older adults. Hip fractures cause the greatest number of deaths from falls annually, and half of people who fracture a hip are unable to return home. Sixty percent of falls happen at home, 30% occur in public, and 10% happen in health care institutions.

◆ The Solution

Minimizing the risk of falling is an important consideration for older adults. Some of the things older adults can do to decrease their risk include:

- Maintaining a regular exercise program, which increases strength, balance, and coordination.
- Making living areas safer by removing throw rugs, increasing lighting, using non-slip mats in the bathroom, having rails on all stairs (in and outdoors), having rails in the tub and shower.
- Asking doctor to review medications to make sure that drugs are not causing dizziness and other side effects.
- Having an annual eye examination, as impaired vision is a major factor in falling.
- If balance is impaired or a fall has occurred, visiting a specialized fall prevention center for complete evaluation.

Mistake #6: Not having a medication management plan

◆ The Problem

While seniors have benefited by living longer and healthier lives because of prescription medications, incorrect prescribing or using of drugs can be dangerous. There is a direct correlation between age and the number of drugs prescribed. When hospitalized, 10% to 15% of older adults have adverse drug reactions, which is the fourth leading cause of death for people of all ages. Sometimes physicians prescribe inappropriate drugs, inappropriate doses of drugs, or incompatible drugs. Sometimes they order new drugs to treat the side effects of current drugs, and they frequently fail to provide sufficient information about drugs they

prescribe. Patients complicate the matter by inaccurate or non-reporting of symptoms or side effects, not telling their doctor about all drugs and supplements they use, by taking their drugs incorrectly, or by self-medicating with alcohol, over-the-counter drugs, or illicit drugs.

◆ **The Solution**

It is imperative that seniors have a plan to manage the following medication issues:

- Knowing their medications' purpose, expected effects and potential side effects
- Reporting positive and adverse affects to their doctors
- Administering their medications correctly
- Obtaining refills for medications in a timely fashion

Safe administration of medications is facilitated by the use of a medication administration box, or med set-up box, in which pills are put in small boxes for consumption at the correct time on the correct day. Seniors can help ensure they take their medications correctly by asking a family member or licensed nurse to set up their medications in the boxes weekly.

Mistake #7: Not having a single primary care physician to oversee all treatment

◆ **The Problem**

Fragmentation of health care and conflicting medications are problems that can be avoided by having a primary care physician to oversee all treatment. If patients see a number of different specialists, they may prescribe treatment for one condition that complicates another condition. For example, patients on glaucoma medication should not take certain drugs that might be prescribed by an allergist. And a patient with dizziness should avoid certain drugs that might lower blood pressure and make him dizzy and increase his risk of falling.

◆ **The Solution**

Seniors should find a primary care physician—an internal medicine specialist, geriatric specialist, or family physician—with interest and expertise in caring for older adults. The primary physician should coordinate all referrals to specialists. This will enable one doctor to maintain the “big picture” of the person as a whole instead of having many doctors who look only at one problem or organ system. Seniors who need help finding a good primary care specialist can seek the advice of a geriatric care consultant with knowledge of skilled geriatric doctors in their community.

Mistake #8: Not seeking medical help after early warning signs

◆ **The Problem**

Everyone knows they should call 911 for symptoms of a heart attack. But many people will wait hours or days when having symptoms of a “brain attack” or stroke. However, studies have shown that paralysis can be avoided or reduced by getting to the emergency room within four hours of the onset of stroke symptoms. Obtaining prompt medical care can minimize other health problems.

For example, seniors may delay seeing their doctor for such symptoms as heartburn, shortness of breath, and even skin lesions. Heartburn may be the precursor to either a heart attack or bleeding from the stomach. Shortness of breath can also be a symptom of heart attack, or it may indicate an acute illness like pneumonia. And many skin lesions, if left untreated, may become worrisome skin cancers. Sometimes seniors ignore symptoms because acknowledging them is frightening. However, avoiding early warning signs is a recipe for more serious health concerns.

◆ **The Solution**

The solution is easy—promptly let your doctor know if you are having new symptoms, or if pre-existing symptoms are becoming worse. Seniors can phone the doctor's office and leave a message about symptoms, or better yet, schedule an appointment to see the doctor for a personal evaluation of symptoms. If seniors are unsure whether a symptom is serious enough to report to their physician, they can consult a nurse care consultant for advice.

Mistake #9: Not participating in prevention programs

◆ **The Problem**

Many prevention programs are available to reduce the incidence of health problems, but they aren't effective unless they are used. Some seniors don't take advantage of these programs because they aren't aware of them, and others don't understand their benefits.

◆ **The Solution**

Seniors should avail themselves of all illness prevention programs. These include the following programs and services:

- Immunizations for pneumonia, hepatitis (if traveling), and influenza
- Cancer screenings for men and women—PSA, mammograms, PAP smears, etc.
- Bone density screenings
- Smoking cessation programs
- Screening programs for diabetes, high cholesterol, etc.
- Vision and hearing screening programs

Mistake #10: Not asking family and friends for help

◆ **The Problem**

Seniors are frequently reluctant to ask for help from family and friends. The major reasons they avoid asking for help is a desire not to be a burden on loved ones and fear that if they can't do everything on their own, they will end up in a nursing home. Failure to ask for help when needed usually results in small problems becoming larger and ultimately can lead to major health issues that could have been easily resolved earlier. For example, falling and breaking a hip while shoveling an icy drive is much less desirable than asking a grandson to shovel the driveway.

◆ **The Solution**

Older adults should take a deep breath and admit when they could use some help. This may include asking friends, family members, or professionals such as geriatric care consultants, to help them with any health

or household issues they can't safely deal with alone. This can include asking for a ride to doctor's appointments, needing a little help maintaining their home or other such daily needs. By getting a little bit of help early on, seniors can avoid small problems from becoming catastrophes that almost guarantee a poor outcome.

Reference

Institute for Healthcare Advancement. (8 December, 2003). 10 Most Common Healthcare Mistakes Made by Seniors According to Institute for Healthcare Advancement. Retrieved Feb. 16, 2004 from http://www.iha4health.org/media_currentpr.html

HOW MATRIX CAN HELP

Matrix AdvoCare Network has provided care consulting and health advocacy to seniors, people with disabilities, persons with terminal illnesses, their families and professionals working with them since 1987. Matrix Care Consultants frequently assist clients in advance care planning as well as advocating for clients through acute and chronic illness and death. You can contact Matrix at 763/560-1010 or 800/560-0961 for assistance with Minnesota residents or individuals moving to or from Minnesota.

www.matrixadvocare.com



Brooklyn Crossing • Suite 505
3300 County Road 10
Minneapolis, MN 55429